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Commission on the Status of Women
Fifty-sixth session
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Agenda item 3
Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century"

Tunisia:* draft decision

The Commission on the Status of Women recommends to the Economic and Social Council the approval of the following draft decision for adoption by the General Assembly:

"Ending female genital mutilation

"The General Assembly, recalling its resolutions 56/128 of 19 December 2001, 58/156 of 22 December 2003 and 60/141 of 16 December 2005, Commission on the Status of Women resolutions 51/2 of 9 March 2007, 52/2 of 7 March 2008 and 54/7 of 12 March 2010, as well as agreed conclusions of the Commission, and all other relevant resolutions, and taking note of the report of the Secretary-General[1] on ending female genital mutilation and the recommendations contained therein, decides to consider the issue of ending female genital mutilation at its sixty-seventh session under the agenda item entitled 'Advancement of women'."

* On behalf of the States Members of the United Nations that are members of the Group of African States; submitted in accordance with rule 69 of the rules of procedure of the functional commissions of the Economic and Social Council.

[1] E/CN.6/2012/8.

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Algeria:* draft resolution

The Commission on the Status of Women recommends to the Economic and Social Council the adoption of the following draft resolution:

Situation of and assistance to Palestinian women

The Economic and Social Council,

Having considered with appreciation the report of the Secretary-General,[1]

Recalling the Nairobi Forward-looking Strategies for the Advancement of Women,[2] in particular paragraph 260 concerning Palestinian women and children, the Beijing Platform for Action adopted at the Fourth World Conference on Women[3] and the outcomes of the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century",[4]

Recalling also its resolution 2011/18 of 26 July 2011 and other relevant United Nations resolutions, including General Assembly resolution 57/337 of 3 July 2003,

* On behalf of the States Members of the United Nations that are members of the Group of 77 and China; in accordance with rule 69 of the rules of procedure of the functional commissions of the Economic and Social Council.

[1] E/CN.6/2012/6.

[2] *Report of the World Conference to Review and Appraise the Achievements of the United Nations Decade for Women: Equality, Development and Peace, Nairobi, 15-26 July 1985* (United Nations publication, Sales No. E.85.IV.10), chap. I, sect. A.

[3] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.

[4] General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.

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on the prevention of armed conflict, and Security Council resolution 1325 (2000) of 31 October 2000, on women and peace and security,

Recalling further the Declaration on the Elimination of Violence against Women[5] as it concerns the protection of civilian populations,

Recalling the International Covenant on Civil and Political Rights,[6] the International Covenant on Economic, Social and Cultural Rights[6] and the Convention on the Rights of the Child,[7] and reaffirming that these human rights instruments must be respected in the Occupied Palestinian Territory, including East Jerusalem,

Expressing deep concern about the grave situation of Palestinian women in the Occupied Palestinian Territory, including East Jerusalem, resulting from the severe impact of the ongoing illegal Israeli occupation and all of its manifestations,

Expressing grave concern about the increased difficulties being faced by Palestinian women and girls living under Israeli occupation, including the continuation of home demolitions, evictions of Palestinians, the revocation of residency rights and arbitrary detention and imprisonment, as well as high rates of poverty and unemployment, food insecurity, inadequate water supply, incidents of domestic violence, and declining health, education and living standards, including the rising incidence of trauma and decline in their psychological well-being, and expressing grave concern about the dire humanitarian crisis and insecurity and instability on the ground in the Occupied Palestinian Territory, in particular in the Gaza Strip,

Deploring the dire economic and social conditions of Palestinian women and girls in the Occupied Palestinian Territory, including East Jerusalem, and the systematic violation of their human rights resulting from the severe impact of ongoing illegal Israeli practices, including displacement and the confiscation of land, particularly in connection with the construction and expansion of settlements and the Wall, which continue to constitute a major obstacle to peace on the basis of the two-State solution, and the continued imposition of closures and restrictions on the movement of persons and goods, which have detrimentally affected their right to health care, including access for pregnant women to health services for antenatal care and safe delivery, education, employment, development and freedom of movement,

Gravely concerned, in particular, about the critical socio-economic and humanitarian situation in the Gaza Strip, including that resulting from the Israeli military operations and the imposition of a blockade consisting of the prolonged closure of border crossings and severe restrictions on the movement of persons and goods, as well as the continued impeding of the reconstruction process by Israel, the occupying Power, which has detrimentally affected every aspect of the lives of the civilian population, especially women and children, in the Gaza Strip,

Stressing the importance of providing assistance, especially emergency assistance, to alleviate the dire socio-economic and humanitarian situation being faced by Palestinian women and their families,

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[5] See General Assembly resolution 48/104.

[6] See General Assembly resolution 2200 A (XXI), annex.

[7] United Nations, *Treaty Series*, vol. 1577, No. 27531.

Emphasizing the importance of increasing the role of women in peacebuilding and decision-making with regard to conflict prevention and the peaceful resolution of conflicts as part of efforts to ensure the safety and well-being of all women in the region, and stressing the importance of their equal participation and involvement in all efforts for the achievement, maintenance and promotion of peace and security,

1. *Reaffirms* that the Israeli occupation remains the major obstacle for Palestinian women with regard to their advancement, self-reliance and integration in the development of their society, and stresses the importance of efforts to increase their role in decision-making with regard to conflict prevention and resolution and to ensure their equal participation and involvement in all efforts for the achievement, maintenance and promotion of peace and security;

2. *Calls upon* the international community, in this regard, to continue to provide urgently needed assistance, especially emergency assistance, and services in an effort to alleviate the dire humanitarian crisis being faced by Palestinian women and their families and to help in the reconstruction of relevant Palestinian institutions, with the integration of a gender perspective into all of its international assistance programmes, and commends the implementation of the Palestinian Authority's plan of August 2009 for constructing the institutions of an independent Palestinian State within a twenty-four-month period and the significant achievements made, as confirmed by international institutions, including the World Bank, the International Monetary Fund and the United Nations;

3. *Demands* that Israel, the occupying Power, comply fully with the provisions and principles of the Universal Declaration of Human Rights,[8] the Regulations annexed to the Hague Convention IV of 1907,[9] the Geneva Convention relative to the Protection of Civilian Persons in Time of War, of 12 August 1949,[10] and all other relevant rules, principles and instruments of international law, including the International Covenants on Human Rights, in order to protect the rights of Palestinian women and their families;

4. *Urges* the international community to continue to give special attention to the promotion and protection of the human rights of Palestinian women and g[illegible]'s and to intensify its measures to improve the difficult conditions being faced by Palestinian women and their families living under Israeli occupation;

5. *Calls upon* Israel to facilitate the return of all refugees and displaced Palestinian women and children to their homes and properties, in compliance with the relevant United Nations resolutions;

6. *Stresses* the urgent need for sustained and active international involvement, including by the Quartet, to support both parties in resuming, advancing and accelerating the peace process negotiations for the achievement of a just, lasting and comprehensive peace settlement, on the basis of United Nations resolutions, the Quartet road map to a permanent two-State solution to the Israeli-

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[8] General Assembly resolution 217 A (III).

[9] See Carnegie Endowment for International Peace, *The Hague Conventions and Declarations of 1899 and 1907* (New York, Oxford University Press, 1915).

[10] United Nations, *Treaty Series*, vol. 75, No. 973.

Palestinian conflict[11] and the Arab Peace Initiative adopted by the Council of the League of Arab States at its fourteenth session;[12]

7. *Requests* the Commission on the Status of Women to continue to monitor and take action with regard to the implementation of the Nairobi Forward-looking Strategies for the Advancement of Women,[2] in particular paragraph 260 concerning Palestinian women and children, the Beijing Platform for Action[3] and the outcomes of the twenty-third special session of the General Assembly entitled "Women 2000: gender equality, development and peace for the twenty-first century";[4]

8. *Requests* the Secretary-General to continue to review the situation, to assist Palestinian women by all available means, including those laid out in the report of the Secretary-General on the situation of and assistance to Palestinian women,[1] and to submit to the Commission on the Status of Women at its fifty-seventh session a report, including information provided by the Economic and Social Commission for Western Asia, on the progress made in the implementation of the present resolution.

[11] S/2003/529, annex.

[12] A/56/1026-S/2002/932, annex II, resolution 14/221.

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Azerbaijan,* Belarus, Georgia and Turkey*: draft resolution

Release of women and children taken hostage, including those subsequently imprisoned, in armed conflicts

The Commission on the Status of Women,

Guided by the purposes, principles and provisions of the Charter of the United Nations,

Guided also by the principles and norms of international humanitarian law, in particular the Geneva Conventions of 12 August 1949[1] and the Additional Protocols thereto of 1977,[2] as well as relevant international standards of human rights, in particular the Universal Declaration of Human Rights,[3] the International Covenant on Economic, Social and Cultural Rights,[4] the International Covenant on Civil and Political Rights,[4] the Convention on the Elimination of All Forms of Discrimination against Women,[5] the Convention on the Rights of the Child,[6] the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment[7] and the Vienna Declaration and Programme of Action, adopted on 25 June 1993 by the World Conference on Human Rights,[8]

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* In accordance with rule 69 of the rules of procedure of the functional commissions of the Economic and Social Council.

[1] United Nations, *Treaty Series*, vol. 75, Nos. 970-973.

[2] Ibid., vol. 1125, Nos. 17512 and 17513.

[3] General Assembly resolution 217 A (III).

[4] See General Assembly resolution 2200 A (XXI), annex.

[5] United Nations, *Treaty Series*, vol. 1249, No. 20378.

[6] Ibid., vol. 1577, No. 27531.

[7] Ibid., vol. 1465, No. 24841.

[8] A/CONF.157/24 (Part I), chap. III.

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Taking duly into account the International Convention for the Protection of All Persons from Enforced Disappearance, adopted by the General Assembly in its resolution 61/177 of 20 December 2006,

Recalling all its previous resolutions on the release of women and children taken hostage, including those subsequently imprisoned, in armed conflicts, as well as all resolutions of the Commission on Human Rights concerning hostage-taking and General Assembly resolution 61/172 of 19 December 2006,

Recognizing that everyone has the right to life, liberty and security of person and that the taking of hostages is an offence of grave concern to the international community,

Recalling the relevant provisions contained in the instruments of international humanitarian law relative to the protection of the civilian population as such,

Reaffirming the Beijing Declaration and Platform for Action,[9] as well as the outcome documents of the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century",[10] and the outcome document of the special session of the General Assembly on children, entitled "A world fit for children",[11] including the provisions therein regarding violence against women and children, and welcoming the ten-year review and appraisal of the Beijing Declaration and Platform for Action at the forty-ninth session of the Commission on the Status of Women and General Assembly decision 64/530 on the commemoration of the fifteenth anniversary of the adoption of the Beijing Declaration and Platform for Action,

Recalling General Assembly resolution 57/337 of 3 July 2003 on the prevention of armed conflict, and Security Council resolutions 1325 (2000) of 31 October 2000, 1820 (2008) of 19 June 2008, 1888 (2009) of 30 September 2009, 1889 (2009) of 5 October 2009 and 1960 (2010) of 16 December 2010 on women, peace and security, as well as its resolutions 1314 (2000) of 11 August 2000, 1379 (2001) of 20 November 2001, 1460 (2003) of 30 January 2003, 1539 (2004) of 22 April 2004, 1612 (2005) of 26 July 2005, 1882 (2009) of 4 August 2009 and 1998 (2011) of 12 July 2011 on children and armed conflict,

Expressing grave concern at the continuation of armed conflicts in many regions throughout the world and the human suffering and humanitarian emergencies they cause,

Noting that women and children taken hostage, including those subsequently imprisoned, in armed conflicts, whether international or non-international, are victims of serious violations of international law, including international humanitarian law and human rights law, that continue to have a negative impact on efforts to put an end to those conflicts and cause suffering to the families of those women and children, and stressing, in this regard, the need to address the issue from a humanitarian perspective, among others,

Emphasizing that all forms of violence in areas of armed conflict committed against the civilian population as such, including taking women and children

[9] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.

[10] General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.

[11] General Assembly resolution S-27/2, annex.

hostage, seriously contravene international humanitarian law, in particular as set out in the Geneva Conventions of 12 August 1949,

Being cognizant that States that are parties to an armed conflict have a responsibility not to take hostage and subsequently imprison women and children in armed conflict and to ensure accountability as regards implementation of relevant mechanisms, policies and laws in order to protect them, bearing in mind that all parties to the conflict must refrain from hostage-taking,

Concerned that, despite the efforts of the international community, acts of hostage-taking in different forms and manifestations, inter alia, those committed by terrorists and armed groups, continue to take place and have even increased in many regions of the world,

Recognizing that hostage-taking calls for resolute, firm and concerted efforts on the part of the international community, in conformity with international humanitarian law and in accordance with international human rights standards, in order to bring such abhorrent practices to an end,

Expressing its strong belief that the rapid and unconditional release of women and children taken hostage in areas of armed conflict will promote the implementation of the noble goals enshrined in the Beijing Declaration and Platform for Action, as well as the outcome documents of the twenty-third special session of the General Assembly and the outcome document of the special session of the General Assembly on children, entitled "A world fit for children", including the provisions therein regarding violence against women and children,

1. *Reaffirms* that hostage-taking, wherever and by whomever committed, is an illegal act aimed at the destruction of human rights and is, under any circumstances, unjustifiable;

2. *Condemns* all violent acts committed against the civilian population as such, in violation of international humanitarian law in situations of armed conflict, and calls for an effective response to such acts, in particular the immediate release of women and children taken hostage, including those subsequently imprisoned, in armed conflicts, including by strengthening international cooperation in this field;

3. *Also condemns* the consequences of hostage-taking, in particular torture and other cruel, inhuman or degrading treatment or punishment, murder, rape, slavery and trafficking in women and children;

4. *Urges* States that are parties to an armed conflict to take all necessary measures, in a timely manner, to determine the identity, fate and whereabouts of women and children taken hostage, including those subsequently imprisoned, in armed conflicts, and, to the greatest possible extent, to provide their family members, through appropriate channels, with all relevant information they have on their fate and whereabouts;

5. *Invites*, in this regard, States to adopt a comprehensive approach, including all appropriate legal and practical measures and coordination mechanisms;

6. *Recognizes* the need for the collection, protection and management of information on women and children taken hostage, including those subsequently imprisoned, in armed conflicts, according to international and national legal norms and standards, and urges States to cooperate with each other and with other

appropriate actors working in this area, inter alia, by providing all relevant and appropriate information;

7. *Strongly urges* all parties to armed conflicts to respect fully the norms of international humanitarian law and to take all necessary measures for the protection of the civilian population as such, including measures to prevent and combat acts of hostage-taking;

8. *Urges* all parties to armed conflicts to provide safe, unimpeded access to humanitarian assistance for those women and children, in accordance with international humanitarian law;

9. *Also urges* all parties to an armed conflict to cooperate fully with the International Committee of the Red Cross in establishing the fate and whereabouts of women and children taken hostage, including those subsequently imprisoned;

10. *Stresses* both the need to put an end to impunity and the responsibility of all States to prosecute or bring to justice in accordance with international law those responsible for war crimes, including hostage-taking;

11. *Also stresses* the need for addressing the issue of release of women and children taken hostage, including those subsequently imprisoned, in armed conflicts, also as a part of peace processes, with reference to all justice and rule of law mechanisms, on the basis of transparency, accountability and public involvement and participation;

12. *Emphasizes* the importance of objective, responsible and impartial information, including improved analysis and dissemination of sex- and age-disaggregated data, on hostages, verifiable by relevant international organizations, in facilitating their release, and calls for assistance to those organizations in this regard;

13. *Requests* the Secretary-General to ensure, in the context of the present resolution, the widest possible dissemination of relevant material, in particular material relating to Security Council resolution 1325 (2000), within existing resources;

14. *Also requests* the Secretary-General and all relevant international organizations to use their capabilities and undertake efforts to facilitate the immediate release of civilian women and children who have been taken hostage, including those subsequently imprisoned;

15. *Invites* the special rapporteurs, within their respective mandates, as well as the Special Representative of the Secretary-General on Children and Armed Conflict and the Special Representative of the Secretary-General on Sexual Violence in Conflict, to continue to address the issue of women and children taken hostage, including those subsequently imprisoned, in armed conflicts and its consequences;

16. *Requests* the Secretary-General to submit to the Commission on the Status of Women at its fifty-eighth session a report on the implementation of the present resolution, including relevant practical recommendations, taking into account the information provided by States and relevant international organizations;

17. *Decides* to consider the question at its fifty-eighth session.

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Japan: draft resolution

Gender equality and the empowerment of women in natural disasters

The Commission on the Status of Women,

Bearing in mind that natural disasters affect all human lives and living conditions thereafter, and often have a more direct impact on women as well as vulnerable people such as children, the elderly and persons with disabilities, and that natural disasters may have different impacts on men and women in regard to the associated risks and vulnerabilities, including economic opportunities, safety and family responsibilities,

Recalling the commitments regarding women and girls affected by natural disasters in the Beijing Platform for Action[1] and the outcome document of the twenty-third special session of the General Assembly,[2] and reaffirming that the outcome document stressed the need to incorporate a gender perspective into disaster prevention, mitigation and recovery strategies,

Recalling also the agreed conclusions of the forty-sixth session of the Commission on the Status of Women of 15 March 2002,[3] Commission on the Status of Women resolutions 49/5 of 11 March 2005 and 55/1 of 4 March 2011, the Hyogo Declaration[4] and the Hyogo Framework for Action 2005-2015: Building the

[1] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.
[2] Resolution S-23/3, annex.
[3] See *Official Records of the Economic and Social Council, 2002, Supplement No. 7* (E/2002/27), chap. I, sect. A.
[4] A/CONF.206/6 and Corr.1, chap. I, resolution 1.

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Resilience of Nations and Communities to Disasters,[5] adopted by the World Conference on Disaster Reduction, which was held in Kobe, Hyogo, Japan, from 18 to 22 January 2005, as well as all relevant resolutions of the General Assembly,

Welcoming the response of the affected countries as well as the support and assistance given by the international community in the relief and recovery efforts for natural disasters in all parts of the world, including the devastating earthquake that struck eastern Japan in March 2011, and other recent natural disasters, including those addressed in recent General Assembly resolutions and humanitarian appeals, while stressing the importance of further efforts in such responses, including in the area of gender-sensitive disaster management,

Stressing the importance of taking into account women and vulnerable people, including children, the elderly and persons with disabilities, in every phase of disaster management, and of securing their participation in these processes in order to build an inclusive society supported by a social bond among people through human-centred and community-based approaches, and emphasizing that such a society should promote gender equality and reduce social vulnerabilities for disasters,

1. *Recognizes* that women play a vital role in disaster risk reduction (prevention, mitigation and preparedness), response and recovery, including rehabilitation and reconstruction, and the need to enhance women's capacities to respond to disasters;

2. *Urges* Governments and, where appropriate, United Nations entities, civil society, including non-governmental organizations, the private sector and other stakeholders, to:

(a) Review national policies, strategies and plans and take action to integrate a gender perspective into policies, planning and funding for disaster risk reduction, response and recovery, considering the different impacts that natural disasters have on women and men;

(b) Ensure equal opportunities for the participation of women in decision-making, including with regard to the allocation of resources at all levels regarding disaster risk reduction, response and recovery;

(c) Strengthen the capacities of relevant authorities and institutions at all levels to apply a gender-sensitive approach to disaster risk reduction (prevention, mitigation and preparedness), response and recovery, while raising their awareness, and promote cooperation among them;

(d) Ensure the full enjoyment by women and girls of all human rights in every phase of disaster risk reduction (prevention, mitigation and preparedness), response and recovery;

(e) Provide disaster response and support for recovery that is sensitive to the needs and views of women, including pregnant women and families with infants, such as the provision of food and supplies, the set-up and management of shelter, safety and security, physical and psychological health care and counselling services, while ensuring the involvement of female professionals and field workers;

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[5] Ibid., resolution 2.

(f) Ensure that in post-disaster environments special attention is given to the prevention of various forms of exploitation, including sexual and gender-based violence and the risk of trafficking and girls', including orphans', particular vulnerability, as well as protection, care and support for the victims of violence and the provision, as appropriate, of legal and other relevant services for them to aid, inter alia, in the investigation and prosecution of sexual and gender-based violence, taking into account women's needs so as to avoid their revictimization;

(g) Design and implement gender-sensitive economic relief and recovery projects, including vocational and technical skills training measures, in order to help ensure equal economic opportunities between men and women, paying attention to eliminating obstacles to women's rapid integration or reintegration into the formal employment sector, owing to their role in the social and economic process and taking into account the rural and urban migration that natural disasters may provoke;

(h) Promote income-generating activities and employment opportunities for women affected by natural disasters, particularly rural women, including through supporting the community-based businesses, the establishment of necessary social services and the provision of access to market, credit and other financial services;

(i) Ensure women and men's equal access to natural-hazard early warning systems and promote disaster risk reduction planning, taking into account the specific needs, views and rights of women and men, and raise public awareness and provide training at all levels on gender-sensitive approaches to disaster risk reduction, including in the areas of science and technology;

(j) Ensure women and girls' equal access to and use of information, training and formal and non-formal education on disaster risk reduction so that women and girls can make full use of those resources;

(k) Systematically collect demographic and socio-economic data and information disaggregated by sex, age and disability and continue to develop gender indicators and analyse gender differences, including through gender-sensitive needs assessment and planning processes, and integrate this information into disaster risk reduction and management policies and programmes;

(l) Document and assess disaster responses from a gender perspective and widely disseminate, both nationally, regionally and internationally, information on good practices, lessons learned and tools, including technologies in support of disaster risk reduction, in order to promote and ensure their integration into disaster risk reduction planning;

(m) Recognize and further promote the role of civil society, including community-based organizations, women's organizations and volunteers, in disaster management and in promoting the building of an inclusive, disaster-resilient society that ensures women's full participation;

(n) Recognize also the important role played by female professionals and volunteers, inter alia, in meeting women's needs and further encourage their participation in disaster risk reduction, including prevention, mitigation, preparedness, response and recovery;

(o) Forge constructive partnerships among all stakeholders, including Governments, United Nations entities and other relevant actors, such as civil society, including non-governmental organizations, and the private sector, in order

to strengthen gender perspectives in all aspects of disaster risk reduction, response and recovery;

3. *Encourages* Governments, the United Nations system and regional organizations, and invites donors and assisting countries, to address the vulnerabilities and capacities of women and girls through gender-responsive programming and the allocation of resources in their disaster reduction, response and recovery efforts in coordination with the Governments of affected countries;

4. *Requests* all relevant United Nations entities, according to their mandate, to ensure that gender perspectives continue to be mainstreamed into all aspects of disaster risk reduction, response and recovery;

5. *Requests* the United Nations system to continue to promote gender dimensions in its activities on disaster risk reduction, including at the third World Conference on Disaster Reduction in 2015;

6. *Requests* the Secretary-General to submit a report to the Commission on the Status of Women at its fifty-eighth session on the implementation of the present resolution.

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United States of America: draft resolution

Eliminating maternal mortality and morbidity through the empowerment of women

The Commission on the Status of Women,

Reaffirming its strong commitment to the full implementation of the Beijing Declaration and Platform for Action,[1] the Programme of Action of the International Conference on Population and Development ("Cairo Programme of Action"),[2] adopted in 1994, and the Copenhagen Declaration on Social Development and Programme of Action of the World Summit for Social Development,[3] adopted in 1995, the outcomes of their review conferences and commitments regarding the reduction of maternal, newborn and child mortality and universal access to reproductive health, including those contained in the United Nations Millennium Declaration[4] and the 2005 World Summit Outcome,[5] reaffirming its resolution 54/5 of 12 March 2010 and recalling other relevant United Nations resolutions, in

[1] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.
[2] *Report of the International Conference on Population and Development, Cairo, 5-13 September 1994* (United Nations publication, Sales No. E.95.XIII.18), chap. I, resolution 1, annex.
[3] *Report of the World Summit for Social Development, Copenhagen, 6-12 March 1995* (United Nations publication, Sales No. E.96.IV.8), chap. I, resolution 1, annexes I and II.
[4] See General Assembly resolution 55/2.
[5] See General Assembly resolution 60/1.

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particular Human Rights Council resolutions 11/8 of 17 June 2009,[6] 15/17 of 30 September 2010[7] and 18/2 of 28 September 2011,[8]

Reaffirming also the internationally agreed development goals, including the Millennium Development Goals, in particular Millennium Development Goal 5 on improving maternal health, including the targets to reduce by three quarters between 1990 and 2015 the maternal mortality ratio and to achieve by 2015 universal access to reproductive health, Millennium Development Goal 4 on reducing child mortality, Millennium Development Goal 3 on promoting gender equality and empowerment of women, and Millennium Development Goal 6 on combating HIV/AIDS, malaria and other diseases, and noting with concern that Millennium Development Goal 5 is the least likely of all the Millennium Development Goals to be achieved,

Recalling the Universal Declaration of Human Rights[9] and the obligations of States parties to the International Covenant on Civil and Political Rights,[10] the International Covenant on Economic, Social and Cultural Rights,[10] the Convention on the Elimination of All Forms of Discrimination against Women,[11] the Convention on the Rights of the Child,[12] the Convention on the Rights of Persons with Disabilities,[13] the International Convention on the Elimination of All Forms of Racial Discrimination[14] and the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families,[15]

Recalling also the outcomes of relevant high-level meetings and conferences, including the High-level Plenary Meeting of the General Assembly on the Millennium Development Goals at its sixty-fifth session, of 22 September 2010,[16] the Political Declaration on HIV and AIDS, of 10 June 2011[17] and the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, of 19 September 2011,[18]

Recognizing the need to continue to raise awareness at the national, regional and international levels in order to stimulate greater efforts to reduce unacceptably high rates of maternal mortality and morbidity,

Recognizing also the role of the United Nations system, including its funds, programmes and agencies, in particular the leading roles of the World Health Organization, the United Nations Population Fund, the United Nations Children's Fund, the World Bank and the Joint United Nations Programme on HIV/AIDS, in eliminating preventable maternal mortality and morbidity and the work under the annual World Health Assembly agenda item on monitoring the achievement of the

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[6] See *Official Records of the General Assembly, Sixty-fourth Session, Supplement No. 53* (A/64/53), chap. III, sect. A.

[7] Ibid., *Sixty-fifth Session, Supplement No. 53A* (A/65/53/Add.1), chap. II.

[8] Ibid., *Sixty-sixth Session, Supplement No. 53A* (A/66/53/Add.1 and Corr.1), chap. II.

[9] See General Assembly resolution 217 A (III).

[10] General Assembly resolution 2200 A (XXI), annex.

[11] United Nations, *Treaty Series*, vol. 1249, No. 20378.

[12] United Nations, *Treaty Series*, vol. 1577, No. 27531.

[13] General Assembly resolution 61/106, annex I.

[14] United Nations, *Treaty Series*, vol. 660, No. 9464.

[15] United Nations, *Treaty Series*, vol. 2220, No. 39481.

[16] General Assembly resolution 65/10.

[17] See General Assembly resolution 65/277.

[18] See General Assembly resolution 66/2.

health-related Millennium Development Goals, and welcoming the ongoing efforts of the United Nations Entity for Gender Equality and the Empowerment of Women and other United Nations entities to promote gender equality, empowerment of women, development, human rights and peace through, inter alia, the mainstreaming of a gender equality perspective in United Nations activities,

Welcoming the ongoing partnerships between a variety of stakeholders at the local, national, regional and global levels aimed at addressing the multifaceted determinants of global health and the commitments and initiatives to accelerate progress on the health-related Millennium Development Goals, including those announced at the high-level event on the Millennium Development Goals held at United Nations Headquarters on 25 September 2008, and at the corresponding follow-up high-level event held on 23 September 2009,

Acknowledging the decline of preventable maternal mortality in almost all regions, but noting with great concern the wide disparity among and within countries, with sub-Saharan Africa experiencing well above twice the global average level of maternal mortality, and that maternal mortality is generally highest in rural areas and in poorer and less-educated communities, including in informal urban settlements,

Expressing deep concern that more than 350,000 women and adolescent girls still die every year from largely preventable complications related to pregnancy or childbirth, that adolescent girls face a higher risk of complications and death and that the average annual percentage decline in the global maternal mortality ratio still falls short of the figure of 5.5 per cent required to achieve the first target of Millennium Development Goal 5,

Taking note that, as reported by the World Health Organization,[19] the causes of maternal death include severe bleeding (haemorrhage), infection, high blood pressure in pregnancy (eclampsia), unsafe abortion, obstructed labour and other direct causes, as well as other indirect causes, including malaria, undernutrition, anaemia, chronic non-communicable diseases and HIV/AIDS,

Expressing concern that each year approximately 15 million to 20 million women of childbearing age worldwide, including adolescent girls, suffer from often preventable maternal morbidity, disabilities, injuries and illnesses connected with pregnancy and childbirth, including as a result of early pregnancy, early childbearing and other high-risk conditions, such as uterine prolapse, obstetric fistulas, stress incontinence, hypertension, haemorrhoids, perineal tears, urinary tract infections and severe anaemia, and that, as a result of these conditions, women suffer serious physical, economic, psychological and social consequences that affect their well-being,

Recognizing that the root causes of preventable maternal mortality and morbidity, which can constrain efforts to eliminate them and contribute to their unacceptably high global rates, encompass a wide range of interlinked underlying factors related to development, human rights and health, including, inter alia, poverty, illiteracy, lack of economic opportunities, challenges associated with rapid population growth, poor nutrition, barriers to education, discrimination against

[19] World Health Organization, *The World Health Report 2005: Make Every Mother and Child Count* (Geneva, 2005).

women and girls, harmful traditional practices, such as female genital mutilation/cutting and early and forced marriage, as well as gender-based violence, lack of participation in decision-making, poor health infrastructure, inadequate training for health personnel and inadequate investment in education, nutrition and basic health care,

Recognizing also that most instances of maternal mortality and morbidity are preventable and that preventable maternal mortality and morbidity is a health, development and human rights challenge that also requires the effective promotion and protection of the human rights of women and girls, in particular their rights to life, to be equal in dignity, to education, to be free to seek, receive and impart information, to enjoy the benefits of scientific progress, to freedom from discrimination and to enjoy the highest attainable standard of physical and mental health, including sexual and reproductive health,

Noting that a human rights-based approach to eliminating preventable maternal mortality and morbidity is underpinned by the principles of, inter alia, accountability, participation, transparency, empowerment, sustainability, non-discrimination and international cooperation,

Expressing concern that more than 215 million women who want to avoid pregnancy or control the spacing of their pregnancies are not using an effective method of contraception, despite increases in use in recent years, and noting that meeting the unmet need for family planning with safe, effective and affordable methods of modern contraception would avert nearly 100,000 maternal deaths each year,

Deeply concerned that early marriage leads to early pregnancy and early childbearing, which presents a much higher risk of complications during pregnancy and delivery leading to maternal mortality and morbidity, increases the risk of disability, stillbirth and maternal death, exposes young married girls to a greater risk of domestic violence, as well as HIV and sexually transmitted infections, and reduces their opportunities to complete their education, gain comprehensive knowledge, participate in the community or develop employable skills, and recognizing with concern that limited access to the highest attainable standard of health, including sexual and reproductive health, causes high levels of obstetric fistula and other maternal morbidities, as well as maternal mortality,

Expressing deep concern that HIV infection significantly increases the risk of maternal mortality and morbidity, so that, in countries with high HIV prevalence, AIDS-related complications are one of the leading causes of maternal mortality, and that nearly half of the pregnant women living with HIV do not have access to critical services, including antiretroviral therapy and, in particular, sexual and reproductive health-care services, including family planning, access to contraception methods and HIV prevention,

Noting with concern that maternal and child health is inextricably linked to the risk of non-communicable diseases and associated risk factors, specifically given that prenatal malnutrition and low birth weight create a predisposition to obesity, high blood pressure, heart disease and diabetes later in life and that conditions such as maternal obesity and gestational diabetes are also associated with an increased risk of contracting non-communicable diseases,

Acknowledging that cervical cancer kills around 250,000 women each year, many of childbearing age, and that the vast majority of the deaths and suffering could be averted with highly effective and low-cost screen and treat approaches and through vaccination against the human papilloma virus,

Acknowledging also that failure to prevent maternal mortality and morbidity is among the most significant barriers to the empowerment of women and girls in all aspects of life, the full enjoyment of their human rights and their ability to reach their full potential,

Recognizing that in armed conflict and post-conflict situations, women's reproductive health is subject to particular risks and that sexual violence and rape often contribute to exceptionally high levels of maternal morbidity and mortality,

Noting that health services are needed to protect and enhance the well-being of both rural and urban populations affected and displaced by crises and conflicts and to reduce and prevent maternal mortality and morbidity, including by providing family planning and caring for those who are victims of violence and other harmful practices, including female genital mutilation/cutting,

Emphasizing the role of education and health literacy in improving health outcomes over a lifetime, and expressing concern about the high dropout rate, especially of girls in secondary education,

Recognizing the need to ensure women's and girls' right to education at all levels, as well as sex education based on full and accurate information in a manner consistent with the evolving capacities of girls and boys, and with appropriate direction and guidance,

Reaffirming its commitment to the equal participation of women and men in public and political life as a key element in women's and men's equal participation in eliminating preventable maternal mortality and morbidity as well as in decision-making when defining policies and strategies in that regard,

Reaffirming also that gender equality, the empowerment of women and the elimination of preventable maternal mortality and morbidity cannot be achieved without promoting and protecting the right of women to enjoy the highest attainable standard of physical and mental health, including sexual and reproductive health and reproductive rights, and reaffirming that expanding access to sexual and reproductive health information and health services is essential for achieving the Beijing Platform for Action, the Cairo Programme of Action and the Millennium Development Goals and is crucial for gender equality, the empowerment of women and the full enjoyment by women of all human rights,

Recognizing the need for greater coordination and commitment to improving access to health services for women and children through a primary health-care approach and the provision of proven and well-known evidence-based interventions and to reducing maternal, newborn and child mortality and morbidity, including through a continuum of services, including family planning, prenatal care, skilled birth attendance, emergency obstetric care and post-partum care, including for those living in poverty and in underserved rural areas,

Noting the negative health effects of early pregnancy and early childbearing, acknowledging the direct health benefit of school attendance for young girls, in the light of the link between years of school attendance and delay in childbirth,

including evidence that each additional year of schooling delays the age at which a girl has her first child by approximately six to ten months and that each year of schooling reduces by 14 per cent the likelihood of a girl under 18 having a child, to 23 per cent,

Emphasizing the commitment to provide universal access to reproductive health by 2015 and the need to integrate family-planning, sexual health and health-care services in national strategies and programmes, and to ensure that all women, men and young people have information about, access to and a choice of the widest possible range of family-planning options, including safe, effective, affordable and acceptable modern methods of contraception,

Emphasizing also the importance of strengthening affordable and sustainable health systems that deliver equitable health outcomes, including by improving basic infrastructure and human and technical resources,

Expressing concern about the slow pace of progress in improving maternal, newborn and child health and the inadequate resources for their health, and noting the continuing inequalities among and within Member States, the lack of appreciation of the impact of maternal, newborn and child health on sustainable socio-economic development and the continuing need to address gender inequalities,

Stressing the importance of strengthening health systems to better respond to women's health needs in terms of access, comprehensiveness and quality, and underlining the need to address women's health through comprehensive strategies targeting root causes of gender inequality in health care, including unequal and limited access to health-care services,

Stressing also that with accelerated progress towards Millennium Development Goal 5, it could become possible to envisage, in the not too distant future, a world where preventable maternal mortality has been eliminated,

1. *Calls upon* Member States and the international community to strongly commit at all levels to the elimination of the persistent and unacceptably high global rate of maternal mortality and morbidity;

2. *Urges* government authorities and other leaders at the international, regional, national and local levels to generate the political will, increased resources, commitment, international cooperation and technical assistance urgently required to reduce maternal mortality and morbidity and improve maternal and newborn health;

3. *Calls upon* Member States to fully and effectively implement the Beijing Platform for Action,[20] the Programme of Action of the International Conference on Population and Development ("Cairo Programme of Action")[2] and the outcomes of their review conferences, including the commitments relating to sexual and reproductive health and reproductive rights, and the promotion and protection of all human rights in this context, and to maximize their efforts to eliminate preventable maternal mortality and morbidity by strengthening comprehensive health-care services for women and girls, including access to sexual and reproductive health-care services and information as agreed to in the Beijing Platform for Action and the Cairo Programme of Action;

[20] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.

4. *Also calls upon* Member States to address gender inequalities, poverty, violations of the full enjoyment of all human rights by women and girls, including during childbirth, discrimination against women and girls, including that caused by negative attitudes and gender stereotypes, and harmful traditional practices, such as female genital mutilation/cutting, that contribute to the unacceptably high and persistent global rate of maternal mortality and morbidity, bearing in mind the impact of multiple forms of discrimination; to guarantee to all women access to the highest attainable standard of health; and to ensure women's full participation in decision-making at the local, national and international levels regarding health care;

5. *Encourages* Member States to develop comprehensive strategies to target gender inequality in health care and put into practice policies to ensure women's equitable access to affordable and adequate health services, including primary health care and basic nutrition;

6. *Urges* Member States to build on effective, multisectoral and integrated approaches and to take action at all levels to address the interlinked root causes of maternal mortality and morbidity, such as poverty, poor nutrition, harmful practices such as early marriage, barriers to education, the lack of accessible and appropriate health-care services, information and education, and gender inequality, and to pay particular attention to eliminating all forms of violence against women and girls and promoting women's and girls' full enjoyment of all human rights;

7. *Calls upon* Member States to ensure the right of women and girls to education of good quality and on an equal basis with men and boys, to ensure that they complete a full course of primary education, and to renew their efforts to improve and expand girls' and women's education at all levels, including at the secondary and higher levels, as well as vocational education and technical training, in order to, inter alia, achieve gender equality, the empowerment of women and poverty eradication;

8. *Emphasizes* the need for age-appropriate, evidence-based and comprehensive sex education in order to help prepare young people to deal positively and responsibly with their sexuality and to navigate issues such as marriage, childbearing, sexually transmitted infections and HIV, and complications of pregnancy and childbirth, in particular the high risk associated with early pregnancy and early childbearing, as well as the need to improve the referral and access of adolescents to quality, comprehensive, integrated, accessible and youth-friendly sexual and reproductive health-care services, including family-planning services;

9. *Acknowledges* the social significance of maternity, motherhood and the role of parents in the family and in the upbringing of children and that the upbringing of children requires the shared responsibility of parents, women and men, and society as a whole;

10. *Stresses with deep concern* that early pregnancy, early childbearing and limited access to quality, comprehensive, integrated and accessible sexual and reproductive health-care services, including in the area of skilled birth attendance, emergency obstetric care and the management of complications arising from abortion, causes high levels of maternal mortality and morbidity, including a high prevalence of obstetric fistula, and furthermore entails complications during

pregnancy and childbirth, which often lead to death, particularly for young women and girls;

11. *Urges* Member States and the international community to strengthen the advocacy, policy and programmatic links between HIV and primary health care, sexual and reproductive health, maternal and child health and overall health systems, including by integrating services and eliminating parallel systems for HIV-related services and information, where feasible;

12. *Welcomes* the commitment to working towards the elimination of mother-to-child transmission of HIV by 2015 and substantially reducing AIDS-related maternal deaths, and urges Member States to ensure that women and girls of childbearing age have access to HIV prevention services and that pregnant women have access to antenatal care, information, HIV counselling and other HIV-related services, and to increase the availability of and access to effective prevention and treatment for women living with HIV and their infants, and in this regard welcomes the contribution of the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping Their Mothers Alive;

13. *Urges* Member States and the United Nations system to take steps to implement the recommendations of the World Health Organization for intermittent preventive treatment for all pregnant women at risk of severe malarial infection in high-prevalence malaria areas in sub-Saharan African countries, and strongly encourages Member States to support efforts to increase the use of insecticidal bednets by all family members, including those most vulnerable to malaria, such as pregnant women;

14. *Urges* Member States, with the help of the United Nations system and the international community where needed, to strengthen health systems for women and girls in order to reduce maternal mortality and morbidity, through health financing, training and retention of the health workforce, increasing knowledge and awareness regarding securing appropriate prenatal and post-natal care, procuring and distributing medicines, vaccines, commodities and equipment, and improving infrastructure, information systems, service delivery and political will in leadership and governance, bearing in mind a need for gender mainstreaming;

15. *Calls upon* all stakeholders to consider the relevant findings and recommendations in the thematic study on preventable maternal mortality and morbidity and human rights prepared by the Office of the United Nations High Commissioner for Human Rights,[21] and the subsequent compilation of good and efficient practices that exemplify a human rights-based approach to eliminating preventable maternal mortality and morbidity;

16. *Urges* Member States to strengthen measures, including increased and sustainable financial and human resources, as necessary, to accelerate progress towards the achievement of Millennium Development Goal 5;

17. *Recognizes* the need for intense health and intersectoral efforts with a high level of political commitment, calls upon Member States to accelerate progress in order to achieve Millennium Development Goals 4 and 5 by addressing reproductive, maternal, newborn and child health in a comprehensive manner, inter alia, through the provision of family-planning services, prenatal care, post-natal

[21] A/HRC/14/39.

care, skilled attendants at birth, emergency obstetric and newborn care and methods of preventing and treating sexually transmitted diseases and infections, such as HIV, within strengthened health systems that provide accessible and affordable integrated health-care services and include community-based preventive and clinical care, and urges Member States to use their stewardship and leadership to involve other institutions and sectors in order to strengthen capacity to achieve a greater reduction in preventable maternal mortality in the context of improving the continuum of maternal and child health;

18. *Urges* Member States to engage actively with international organizations and other stakeholders, where needed, in support of national plans to improve nutrition in poor households, including during pregnancy and lactation, and urges Member States, in particular countries with a high burden of maternal and child undernutrition, to consider implementing the Scaling Up Nutrition framework and road map;

19. *Stresses* the critical role of men and boys and the need to share responsibilities between women and men for reducing maternal mortality and morbidity and promoting the health of women and girls, and urges Member States, the United Nations and civil society to include in their development priorities programmes that support the critical role of men in abolishing the practice of early and forced marriage and in supporting women's access to safe conditions for pregnancy and childbirth, contributing to family planning, preventing sexually transmitted infections and HIV, ensuring adequate nutrition for women and girls within their families, including during pregnancy and lactation, and ending violence against women and girls, including harmful practices such as female genital mutilation/cutting and early and forced marriage;

20. *Encourages* Member States, including donor countries, and the international community to increase their efforts to eliminate preventable maternal mortality and morbidity through effective health interventions and health system strengthening, promotion and protection of the full enjoyment of all human rights by women and girls, including in particular the rights to freely consent to marriage, to decide freely and responsibly the number and spacing of their children and to have the information and means to do so, and the empowerment of women and girls, and to give renewed emphasis to maternal mortality and morbidity initiatives in their development partnerships and cooperation arrangements, by honouring existing commitments and considering new commitments in areas such as humanitarian, emergency and crisis situations and by coordinating to strengthen planning and accountability for greatly accelerated progress on reducing maternal mortality and morbidity;

21. *Encourages* Member States and the international community to take measures to protect women and girls, including indigenous and rural women and girls, those living in poverty and those with disabilities, regardless of their immigration status, from gender-based violence and from early and forced marriage, to fully implement their obligations under national and international law with respect to preventing violence and investigating and punishing the perpetrators, to provide victims with access to appropriate quality, comprehensive, integrated and accessible health-care services and counselling and to primary and secondary education, and to scale up humanitarian and legal assistance to victims of rape and

other forms of sexual violence, including when used as a tactic of war, inter alia, to reduce maternal mortality and morbidity;

22. *Calls upon* those Member States that have made commitments to advance the Secretary-General's Global Strategy for Women's and Children's Health,[22] undertaken by a broad coalition of partners in support of national plans and strategies, to implement their commitments to significantly reduce the number of maternal, newborn and under-age-five deaths, as a matter of immediate concern, including, as appropriate, by scaling up a priority package of high-impact interventions and integrating efforts in such areas as health, education, gender equality, water and sanitation, poverty reduction and nutrition, and encourages those States that have not yet done so to consider making such commitments;

23. *Encourages* Member States to consider implementing the recommendations of the Commission on Information and Accountability for Women's and Children's Health to strengthen information on reproductive, maternal and child health, to track resources for women's and children's health and to strengthen oversight and transparency;

24. *Urges* Member States to elaborate and implement comprehensive gender-sensitive poverty eradication strategies that address social, structural and macroeconomic issues in order to eliminate preventable maternal mortality and morbidity;

25. *Notes with concern* the high rate of maternal mortality in armed conflict, in post-conflict countries and in natural disaster situations, where girls and women are at particular risk of gender-based violence, particularly rape and other forms of sexual abuse, which places them at risk of serious infections, such as HIV/AIDS, and of pregnancy that may result in miscarriage and other health problems which, in the absence of health care, can be life-threatening;

26. *Encourages* Member States, in particular those with persistently high rates of maternal mortality and morbidity, to maximize the efficient use of existing resources for maternal health, to meet commitments, such as those included in the Abuja Declaration, to reduce poverty, increase budgetary allocations towards sexual and reproductive health, education and development programmes that would eliminate preventable maternal mortality and morbidity, including the prevention and treatment of haemorrhage, obstructed labour, obstetric fistula, infection and reproductive cancer, improve the management of complications arising from abortions and promote the health, including sexual and reproductive health, of women and girls;

27. *Urges* Member States, the international community, civil society, including women's and youth organizations, the private sector and other relevant actors to strengthen partnerships and international cooperation to eliminate preventable maternal mortality and morbidity;

28. *Encourages* Member States to strengthen the collection of data disaggregated by sex, age, disability, socio-economic status, geographic location and other factors that contribute to maternal mortality and morbidity, and data on other categories needed for monitoring in a timely fashion progress towards the achievement of Millennium Development Goal 5, as well as to provide appropriate

[22] Available from www.everywomaneverychild.org.

avenues for feedback from women who received health services, and to share such data with the United Nations system for better monitoring of progress towards the achievement of Goal 5 and its targets;

29. *Urges* Member States, in cooperation with the international community and civil society, to improve systems to register pregnancies, births and deaths and to support improved public health infrastructure for the collection, analysis and dissemination of data on the burden of maternal morbidity and mortality and its causes at the national and subnational level, including through the use of mobile technologies, where appropriate;

30. *Notes with appreciation* the work done by the United Nations on Millennium Development Goal indicators, in particular those for Millennium Development Goal 5, and in this regard requests the Secretary-General to continue to expand the knowledge base, including the United Nations website, on the progress made towards the achievement of the Goals;

31. *Requests* the Secretary-General to provide a report to the Commission on the Status of Women at its fifty-eighth session, in consultation with Member States, international organizations and all other relevant stakeholders, taking into account relevant United Nations resolutions, on actions to strengthen linkages among programmes, initiatives and activities throughout the United Nations system for gender equality, the empowerment of women and girls, protection of all of their human rights and elimination of preventable maternal mortality and morbidity.

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Australia,* Argentina, Bolivia (Plurinational State of),* Ecuador,* El Salvador, Guatemala,* Mexico* and Nicaragua: draft resolution

Indigenous women: key actors in poverty and hunger eradication

The Commission on the Status of Women,

Reaffirming the Beijing Declaration and Platform for Action,[1] the outcome of the twenty-third special session of the General Assembly,[2] and the declarations adopted by the Commission on the occasion of the tenth and fifteenth anniversaries of the Fourth World Conference on Women,[3]

Reaffirming also that the Convention on the Elimination of All Forms of Discrimination against Women[4] and the Optional Protocol thereto,[5] as well as other relevant international human rights instruments, provide a framework for the promotion and protection of the human rights of indigenous women,

Recalling the United Nations Declaration on the Rights of Indigenous Peoples,[6] which addresses their individual and collective rights,

Stressing the importance of promoting and pursuing the objectives of the United Nations Declaration on the Rights of Indigenous Peoples also through

* In accordance with rule 69 of the rules of procedure of the functional commissions of the Economic and Social Council.

[1] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.

[2] General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.

[3] See Economic and Social Council decisions 2005/232 and 2010/232, respectively.

[4] United Nations, *Treaty Series*, vol. 1249, No. 20378.

[5] Ibid., vol. 2131, No. 20378.

[6] General Assembly resolution 61/295, annex.

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international cooperation in supporting national and regional efforts to achieve the ends of the Declaration, including the right to maintain and strengthen the distinct political, legal, economic, social and cultural institutions of indigenous peoples and the right to participate fully, if they so choose, in the political, economic, social and cultural life of the State,

Recalling its resolution 49/7, entitled "Indigenous women: beyond the ten-year review of the Beijing Declaration and Platform for Action", which calls upon Governments, intergovernmental agencies, the private sector and civil society to take measures that ensure the full and effective participation of indigenous women in all aspects of society,

Affirming that indigenous women represent a wide variety of cultures and traditions with different needs and concerns and contribute to the diversity and richness of civilizations and cultures around the world,

Stressing the importance of recognizing the distinct and crucial contribution of indigenous women, their knowledge and their vital roles in diverse local economies to poverty eradication, food security and sustainable development,

Recognizing that a significant number of smallholder farmers and rural entrepreneurs in developing regions are women, including indigenous women, and that they play a vital role in agricultural and rural development, including by enhancing food security and nutrition for their communities and families,

Recognizing also that the involvement, perspectives and traditional knowledge of indigenous women make an important contribution to sustainable development and the conservation of biodiversity and natural resources, such as land, forests, water, seeds and coastal seas,

Expressing deep concern about the increasing feminization of poverty, emphasizing that the empowerment of women, including indigenous women, is a critical factor in the eradication of poverty and that the implementation of special measures aimed at empowering women can help to achieve this objective, and recognizing that poverty of women, including indigenous women, is directly related, inter alia, to the absence of economic opportunities and of autonomy, lack of access to economic resources, lack of access to education and support services, and minimal participation in the decision-making process,

Concerned about the extreme disadvantages that indigenous peoples, in particular indigenous women, have typically faced across a range of social and economic indicators and the impediments to their full enjoyment of their rights,

Concerned also that the adverse impacts of climate change on women and girls, including indigenous women, can be exacerbated by gender inequality, discrimination and poverty,

Concerned further that indigenous women often suffer from multiple forms of discrimination and poverty which increase their vulnerability to all forms of violence,

Emphasizing that indigenous women should exercise their rights free from discrimination of any kind,

Emphasizing also that the United Nations has an important and continuing role to play in promoting and protecting the rights of indigenous peoples, and the

empowerment of indigenous women and their enjoyment of all human rights and fundamental freedoms,

1. *Urges* States to:

(a) Take particular measures to promote and strengthen policies and programmes for indigenous women with their full participation and respect for their cultural diversity, so that they have the opportunities and the possibility of choice in the development process needed to eradicate the poverty that affects them;

(b) Support the economic activities of indigenous women, in consultation with them and taking into account their traditional knowledge, so as to improve their situation and development, in particular by enhancing their equal access to productive resources and agricultural inputs, such as land, seeds, financial services, technology, transportation and information;

(c) Ensure the realization of the right of indigenous women and girls to education, and promote a multicultural approach to education that is responsive to the needs, aspirations and cultures of indigenous women, including by developing appropriate education programmes, curricula and teaching aids, to the extent possible in the languages of indigenous peoples, by promoting their access to information and communications technologies and by providing for the participation of indigenous women in these processes, and take measures to ensure that indigenous women and girls have the right to equal access to all levels and forms of education without discrimination;

(d) Provide support, investment and technical assistance for the training of indigenous women, and support women's organizations and cooperatives, which contribute to promoting mutual support and leadership;

(e) Formulate and implement, in consultation and collaboration with indigenous women and their organizations, policies and programmes designed to promote capacity-building processes and strengthen their leadership, and take measures to ensure full and effective participation of indigenous women in decision-making processes at all levels and in all areas, and eliminate barriers for their participation in political, economic, social and cultural life;

(f) Take concrete measures to provide and enhance equal access and enjoyment of the highest attainable standard of health for indigenous women, including sexual and reproductive health, and access to safe and clean drinking water and sanitation, and safe cooking and heating;

(g) Respect, preserve and promote, where appropriate, the traditional knowledge of indigenous women with respect to medicine, including the conservation of their vital medicinal plants, animals and minerals;

(h) Comply with and effectively implement all their human rights obligations so as to ensure the full realization and equal enjoyment of the rights of indigenous women;

(i) Take concrete measures to provide equal access to justice for indigenous women at all levels, and ensure that indigenous women have equal rights to own land and other property;

(j) Recognize that poverty and discrimination increase the conditions that generate violence against women, and take actions at the national, local and

community levels to prevent and eliminate all forms of violence against indigenous women;

(k) Collect and disseminate disaggregated data on indigenous women, including those living in rural areas, in order to monitor and improve the impact of development policies and programmes for their well-being;

2. *Encourages* States to support the participation of indigenous women in the United Nations Conference on Sustainable Development, also called Rio+20, and in the High-level Meeting of the General Assembly that is to be called the World Conference on Indigenous Peoples, to be held in 2014;

3. *Encourages* States, intergovernmental organizations, the private sector and civil society to take appropriate measures to promote the rights of indigenous peoples, and respect their cultures, lands, territories and resources and their contribution to sustainable development;

4. *Encourages* UN-Women and, as appropriate, relevant funds, programmes and specialized agencies of the United Nations system, international financial institutions, the private sector, non-governmental organizations and other civil society actors to take measures to develop, finance, implement and support policies and programmes aimed at promoting the empowerment of indigenous women and their enjoyment of all human rights.

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Angola:*, draft decision**

Women, the girl child and HIV and AIDS

The Commission on the Status of Women,

Reaffirming the Beijing Declaration and Platform for Action,[1] the outcome of the twenty-third special session of the General Assembly,[2] the Programme of Action of the International Conference on Population and Development,[3] the Declaration of Commitment on HIV/AIDS,[4] the 2006 Political Declaration on HIV/AIDS[5] and the 2011 Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS,[6] the HIV- and AIDS-related goals contained in the United Nations Millennium Declaration[7] and the Millennium Development Goals, in particular the resolve of Member States to have halted, by 2015, and begun to reverse, the spread of HIV, as well as the commitments on HIV and AIDS made at the 2005 World

* In accordance with rule 69 of the rules of procedure of the functional commissions of the Economic and Social Council.

** On behalf of the States Members of the United Nations that are members of the Southern African Development Community.

[1] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.

[2] General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.

[3] *Report of the International Conference on Population and Development, Cairo, 5-13 September 1994* (United Nations publication, Sales No. E.95.XIII.18), chap. I, resolution 1, annex.

[4] General Assembly resolution S-26/2, annex.

[5] General Assembly resolution 60/262, annex.

[6] General Assembly resolution 65/277, annex.

[7] See General Assembly resolution 55/2.

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Summit and the High-level Plenary Meeting of the sixty-fifth session of the Assembly on the Millennium Development Goals,[8]

Recalling all previous resolutions on this subject,

Reaffirming that prevention, treatment, care and support for people living with and affected by HIV are mutually reinforcing elements of an effective response that must be integrated into a comprehensive approach to combating the epidemic, and recognizing the need to ensure the respect, protection and enjoyment fulfilment of all human rights and fundamental freedoms in the context of HIV and AIDS prevention, treatment, care and support programmes,

Noting evidence of the interrelation between violence against women and girls and HIV, and in this regard recognizing the importance of continued support for the Secretary-General's ongoing campaign "UNiTE to End Violence against Women", including its regional components,

Recognizing the increased vulnerability to HIV infection of populations destabilized by armed conflict, humanitarian emergencies and natural disasters, including refugees, internally displaced persons and, in particular, women and children, including in post-conflict and post-disaster situations,

Deeply concerned by the increased vulnerability to HIV infection faced by women and girls with disabilities, resulting from, inter alia, legal and economic inequalities, gender-based violence, including sexual violence, discrimination and violations of their rights,

Deeply concerned also that there are women and girls living with HIV who would like to space or limit pregnancy but are currently not using an effective method of contraception owing to limited access to voluntary family planning services and to a broad range of contraceptive commodities,

Expressing concern that, while there has been progress in reducing poverty, this progress has been uneven and the number of people living in poverty continues to increase, with women and children constituting the majority of the most affected groups, especially in the least developed countries, and stressing that the ongoing adverse impact of the world financial and economic crisis, the volatile food and energy prices, food insecurity and the challenges posed by climate change, as well as the lack of results so far in the multilateral trade negotiations, have negative implications for social development which is a key component in the fight against HIV and AIDS,

Deeply concerned that the global HIV and AIDS epidemic disproportionately affects women and girls and increases gender inequalities, and that in this regard HIV is the leading cause of death worldwide among women of reproductive age (15-44), and that young women (aged 15-24 years) are 1.6 times more likely than young men to be HIV-positive, that women and girls bear the disproportionate burden of caring for and supporting people living with and affected by HIV and that they become more vulnerable to poverty as a result of the epidemic,

Concerned that the vulnerability of women and girls to HIV is increased by gender inequality, such as their unequal legal, economic and social status, including poverty, as well as other cultural and physiological factors, violence against women

[8] See General Assembly resolution 65/1.

and girls and adolescents, child and forced marriages, premature and early sexual relations, commercial sexual exploitation and female genital mutilation,

Concerned also that HIV infection rates are higher among young people, especially young and married women, who do not finish primary school,

Concerned further that women and girls have different and unequal access to and use of health resources for the prevention of HIV infection and treatment, care and support for people living with or affected by HIV and that there is limited engagement of women and girls in the planning and monitoring of programmes to ensure that their needs are understood and met,

Recognizing that it is critical for those who have been victims of sexual violence to access specialized care, including counselling and post-exposure prophylaxis to reduce the risk of HIV and other sexually transmitted infections,

Noting with deep concern that despite significant progress made in addressing the HIV and AIDS epidemic, the key targets and goals of the 2001 and 2006 Declarations on HIV/AIDS, including those related to women and girls which were set to be achieved by 2010, remain unmet,

Expressing deep concern that funding devoted to HIV and AIDS responses is still not commensurate with the magnitude of the epidemic either nationally or internationally, and that the global crisis continues to have a negative impact on the HIV and AIDS response at all levels, as reflected, inter alia, by the fact that for the first time, in 2010, international assistance has decreased,

Stressing that the HIV and AIDS epidemic, with its devastating scale and impact on women and girls, is often a consequence and a cause of poverty and requires urgent action across all internationally agreed development goals, including the Millennium Development Goals, in all fields and at all levels and recognizing in turn that a gender-responsive approach to HIV can act as a catalyst towards achieving many of these goals,

Stressing also that gender equality and the political, social and economic empowerment of women and girls are fundamental elements in the reduction of their vulnerability to HIV and are essential to reversing the epidemic,

Expressing concern that country-level interventions in national planning, budgeting and accountability mechanisms for HIV responses that target women and girls are limited in scale,

1. *Reaffirms* the need for Governments, supported by the relevant actors, including civil society and the private sector, to intensify national efforts and international cooperation in the full and effective implementation of the commitments contained in the Declaration of Commitment on HIV/AIDS,[4] the 2006 Political Declaration on HIV/AIDS[5] and the 2011 Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS,[6] the Beijing Platform for Action[9] and the Programme of Action of the International Conference on Population and Development;[3]

[9] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.

2. *Also reaffirms* the commitment to achieve universal access to comprehensive HIV prevention, treatment, care and support programmes, and the resolve to have halted, by 2015, and begun to reverse, the spread of HIV, and stresses the urgency of significantly scaling up efforts towards meeting these goals, including by addressing factors that hinder women's access to such programmes;

3. *Further reaffirms* the commitment to achieve universal access to reproductive health by 2015, as set out in the Programme of Action of the International Conference on Population and Development and in Millennium Development Goal 5, and in other agreements and instruments on this key issue, which encompasses integrating this goal into strategies to attain internationally agreed development goals, including those contained in the United Nations Millennium Declaration,[7] aimed at reducing maternal mortality, improving maternal health, reducing child mortality, promoting gender equality, combating HIV and AIDS and eradicating poverty;

4. *Stresses* the need to significantly increase and coordinate political and financial commitment to addressing gender equality and responding to the specific needs of women and girls, including rural women and girls and those living with and/or affected by HIV, in national HIV and AIDS responses, and urges Governments to effectively mainstream gender equality in their national policies, strategies and budgets and reflect therein the gender dimension of the epidemic, in line with the time-bound goals of the 2011 Political Declaration on HIV and AIDS, as well as the goals of the Beijing Platform for Action and the Programme of Action of the International Conference on Population and Development, and the Millennium Development Goals;

5. *Also stresses* the need to develop and adopt effective measuring mechanisms to monitor and track international and national resources allocated to ensure gender equality within HIV and AIDS responses;

6. *Emphasizes* the need to strengthen policy, programme linkages and coordination between HIV and AIDS and sexual and reproductive health, and their inclusion in national development plans, including, poverty reduction strategies and sector-wide approaches, where they exist, as a necessary strategy for fighting the HIV and AIDS epidemic and mitigating its impact on the population, and achieving more relevant and cost-effective interventions with greater impact;

7. *Urges* Governments to take all necessary measures to create an enabling environment for the empowerment of women and girls, to strengthen their economic independence and their right to property and inheritance, and to protect and promote their full enjoyment of all human rights and fundamental freedoms in order to enable them to protect themselves from HIV infection and to mitigate the impact of the epidemic;

8. *Reaffirms* the need for Governments, civil society, donors and others responding to the HIV and AIDS epidemic to address:

(a) Challenges faced by women and girls associated with the fact that they are disproportionately affected by the epidemic, more easily infected than men and boys, and face the disproportionate burden of caregiving responsibilities;

(b) Challenges faced by the women and girls who find themselves having to provide care and/or economic support for those living with or affected by HIV,

including by providing resources and facilities, ensuring the balanced sharing of the provision of care by both men and women, and boys and girls, and addressing situations faced by girls who were forced to drop out of school owing to caregiving responsibilities;

(c) Challenges faced by women and girls in emergency situation and humanitarian responses, including vulnerability to HIV;

(d) Challenges faced by older women, including stigma and discrimination, sexual violence and lack of resources, in accessing HIV prevention, treatment, care and support, as well as in caring for people living with or affected by HIV, including orphaned and other vulnerable children and children affected or orphaned by AIDS;

(e) Challenges of child-headed households, in particular those headed by girls;

(f) Increased vulnerability to HIV faced by women and girls living with disabilities, by ensuring their equal access to prevention, treatment, care and support, as an integral part of their HIV and AIDS response;

(g) The situation faced by children and young persons, particularly girls and young women, who in the context of HIV may be subjected to the worst forms of child labour or trafficked as a result of death or illness of family members or caregivers, and to protect these children from gender-based violence, including sexual abuse and sexual exploitation;

9. *Urges* Governments to strengthen initiatives that would increase the capacities of women and adolescent girls to protect themselves from HIV infection, principally through the provision of health care and health services, including for sexual and reproductive health, in accordance with the Programme of Action of the International Conference on Population and Development and the 2011 Political Declaration on HIV and AIDS, and that integrate HIV and AIDS prevention, treatment, care and support and include voluntary counselling and testing, including through prevention education that promotes gender equality within a culturally and gender-sensitive framework;

10. *Also urges* Governments to ensure, in the context of prevention programmes for HIV and other sexually transmitted infections, accessible and affordable procurement of safe and effective prevention commodities, in particular male and female condoms, and to also ensure that their supply is adequate and secure;

11. *Further urges* Governments to strengthen and implement legal, policy, administrative and other measures for the prevention and elimination of all forms of violence against women and girls, including harmful traditional and customary practices, female genital mutilation, domestic violence, abuse, early marriage, child and forced marriage, rape, including marital rape, and other forms of sexual violence and coerced sexual activity, battering and trafficking in women and girls, and to ensure that violence against women and HIV are addressed as an integral part of the national HIV and AIDS response;

12. *Urges* States to take special measures for the protection of women and girls affected by armed conflicts and, in particular, to protect them from sexually transmitted diseases, such as HIV and AIDS, gender-based violence, including rape and sexual abuse, and sexual exploitation, torture, abduction and forced labour,

paying special attention to refugee and displaced women and girls, and to take into account the special needs of women and girls affected by armed conflict in the delivery of humanitarian assistance and disarmament, demobilization, rehabilitation assistance and reintegration processes;

13. *Urges* Governments, where they have not yet done so, to institute and ensure the enforcement of laws to protect women and girls from early marriage, child and forced marriage and marital rape;

14. *Also urges* Governments to prioritize and expand access to treatment for all people in all settings, in a progressive and sustainable manner, and in so doing to include the prevention and treatment of opportunistic infections and other HIV-related diseases and the effective use of and adherence to antiretroviral medication, including through access to clinical and laboratory testing and post-exposure prophylaxis, while promoting sexual and reproductive health, in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Declaration and Platform for Action;[1]

15. *Further urges* Governments to promote access to affordable, high-quality, safe and effective drugs, and HIV and maternal health-related pharmaceutical products for women and girls and to collect, analyse and report quantitative and qualitative data on treatment, disaggregated by age, sex, geographical location, marital status and continuity of care;

16. *Reaffirms* the commitment of Governments to use, to the full, existing flexibilities under the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights[10] specifically geared to promoting access to and trade of medicines so as to increase access to treatment where applicable, as undertaken in the 2011 Political Declaration on HIV and AIDS;

17. *Requests* Governments to promote and provide equal and equitable access for all persons to social services related to health care, including education, clean water and safe sanitation, nutrition, food security and health, education programmes and social protection schemes, especially for women and girls living with or affected by HIV, and to address the factors that hinder women's use of such services;

18. *Calls upon* Governments to intensify efforts to eliminate all forms of discrimination against women and girls in relation to HIV and AIDS, including the negative stereotypes associated with them, their stigmatization, discriminatory attitudes against them and gender inequalities, and to encourage the active involvement of men and boys in this regard;

19. *Reaffirms* the pledge of Governments to eliminate gender-based abuse and violence against women and girls and, in this regard, to ensure that women have the right to exercise control over and decide freely and responsibly on matters related to their sexuality, including their sexual and reproductive health, free of coercion, discrimination and violence, as stipulated in the Programme of Action of the International Conference on Population and Development and the Beijing Declaration and Platform for Action;

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[10] See *Legal Instruments Embodying the Results of the Uruguay Round of Multilateral Trade Negotiations, done at Marrakesh on 15 April 1994* (GATT secretariat publication, Sales No. GATT/1994-7).

20. *Calls upon* all Governments and the international donor community to integrate a gender mainstreaming approach towards men and women in all matters of international assistance and cooperation and to take measures to ensure that resources commensurate with the impact of HIV and AIDS on women and girls are made available, in particular in funding provided to national HIV and AIDS programmes designed to ensure the full enjoyment of all human rights and fundamental freedoms by women and girls in the context of the epidemic, to promote economic opportunities for women, including opportunities to diminish their financial vulnerability and their risk of exposure to HIV, and to achieve the gender-equality goals set out, inter alia, in the Declaration of Commitment on HIV/AIDS, and the 2006 and 2011 Political Declarations on HIV and AIDS;

21. *Calls upon* Governments to integrate HIV prevention, voluntary counselling and testing, antiretroviral treatment and elimination of mother-to-child transmission into other health services, including sexual and reproductive health services, which includes family planning, maternal and child health, and tuberculosis, as well as the provision of services for the prevention and treatment of sexually transmitted infections in the mother-to-child transmission services for pregnant women living with HIV;

22. *Welcomes* the commitment to work towards the target of eliminating mother-to-child transmission of HIV by 2015 and substantially reducing AIDS-related maternal deaths, and calls upon the international community for accelerated efforts in this regard;

23. *Recognizes* the importance of strengthening health systems, in particular primary health care, and the need to integrate the HIV response into it, in order to promote access of women and girls to HIV- and AIDS-related services, and further recognizes the need to address the challenges faced by developing countries in this regard;

24. *Acknowledges* that UN-Women, a new stakeholder, can play an important role in global efforts to combat HIV by promoting gender equality and the empowerment of women, which are fundamental for reducing the vulnerability of women to HIV;

25. *Requests* the Secretariat and co-sponsors of the Joint United Nations Programme on HIV/AIDS, UN-Women and other United Nations organizations responding to the HIV and AIDS epidemic, as well as the Global Fund to Fight AIDS, Tuberculosis and Malaria, to continue to ensure that programmes and policies for addressing the specific needs of women and girls are developed and adequately resourced;

26. *Calls upon* Member States to accelerate action on women, girls, gender equality and HIV, in partnership with all relevant stakeholders, including civil society organizations, in accordance with the Beijing Declaration and Platform for Action, the Programme of Action of the International Conference on Population and Development and the 2011 Political Declaration on HIV and AIDS;

27. *Recommends* the development of the use of the harmonized data on women and girls, and the development and refinement of relevant indicators as part of the process to update the core indicators on HIV and AIDS for the reporting system for the special session of the General Assembly on HIV/AIDS, so as to help measure women's and girls' inequalities in the context of HIV;

28. *Encourages* the United Nations system to continue to support national monitoring and evaluation mechanisms in the context of the "three ones" principles, to enable the production and dissemination of comprehensive and timely information on the impact of the epidemic on women and girls, including through the collection of data disaggregated by sex, age and marital status, and to raise awareness about the need to address the critical intersection between gender inequality and HIV and AIDS;

29. *Encourages* Member States to work in partnership with the Global Coalition on Women and AIDS, the Joint United Nations Programme on HIV/AIDS and its partners, so as to mobilize and support a wide range of national actors, including women's groups and networks of women living with HIV, in order to ensure that national HIV and AIDS programmes are better able to respond to the specific needs and vulnerabilities of women, girls and adolescents;

30. *Notes* the national and international initiatives contributing to reducing maternal and child mortality, and urges Governments to rapidly scale up access to HIV prevention and treatment programmes designed to eliminate mother-to-child transmission of HIV and improve maternal health, including by encouraging men to participate with women and girls in such programmes and by addressing barriers faced by women and girls in accessing HIV- and AIDS-related services, and to provide sustained treatment and care for the mother after pregnancy, including care and support for the family;

31. *Welcomes* all the relevant International Labour Organization Recommendations concerning HIV and AIDS which seek, inter alia, to protect working women against HIV infection and mitigate its impact for those living with or affected by HIV, including through the provision of information on HIV and AIDS in the workplace, through employment programmes and services and in vocational training;

32. *Encourages* the design and implementation of programmes, including awareness-raising programmes, to encourage and enable men, including young men, to adopt safe, non-coercive and responsible sexual and reproductive behaviour and to use effective methods to prevent the transmission of HIV and other sexually transmitted infections to women and girls;

33. *Stresses* the importance of ensuring that young men and women have access to information and education, including peer education and youth-specific HIV education, sex education and health care, social and other educational services necessary for changing risky sexual and other behaviours, so as to enable them to develop the life skills required to reduce their vulnerability to HIV infection and reproductive ill health, in full partnership with young persons, parents, families, educators, employers' and workers' organizations and health-care providers;

34. *Calls for* enhanced efforts by all relevant actors to mainstream gender equality between women and men in the development of HIV and AIDS programmes and policies and in the training of personnel involved in implementing such programmes, including by focusing on the role of men and boys as partners for gender equality in addressing HIV and AIDS;

35. *Encourages* Governments and all other relevant actors to promote funding, both domestically and externally, and to support and expedite action-oriented research leading to affordable, safe and effective methods controlled by

43. *Requests* the Secretary-General to submit biennially a report to the Commission on the Status of Women starting from its fifty-eighth session, on the situation of women, the girl child and HIV and AIDS, with an emphasis on accelerated actions taken in regard to women, the girl child and HIV and AIDS, in accordance with the principles and goals contained in the Beijing Declaration and Platform for Action, the Programme of Action of the International Conference on Population and Development, the 2001, 2006 and 2011 Political Declarations on HIV and AIDS and the present resolution, using information provided by Member States, and the organizations and bodies of the United Nations system, with a view to assessing the impact of the implementation of the present resolution on the well-being of women and the girl child.

United Nations E/CN.6/2012/L.8

Economic and Social Council

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7 March 2012

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Commission on the Status of Women
Fifty-sixth session
27 February-9 March 2012

Draft report

Rapporteur: Filippo **Cinti** (Italy)

Organization of the session

A. Opening and duration of the session

1. The Commission on the Status of Women held its fifty-sixth session at United Nations Headquarters on 14 March 2011 and from 27 February to 9 March 2012. The Commission held _____ meetings (1st to __).

2. The session was opened by the Chair of the Commission, Marjon Kamara (Liberia), who also made a statement.

3. At the 2nd meeting, on 27 February 2012, statements were made by the President of the Economic and Social Council and the Deputy Secretary-General.

4. At the same meeting, statements were made by the Under-Secretary-General and Executive Director of the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) and by the Chair of the Committee on the Elimination of Discrimination against Women.

5. Also at the same meeting, the distinguished keynote speakers, Ms. Anne Tutwiler, Deputy Director-General of the Food and Agriculture Organization of the United Nations, and Ms. Elisabeth Atangana, President of the Plateforme régionale des organisations paysannes d'Afrique centrale, addressed the Commission.

6. At the 6th meeting, on 29 February, copies of the report of the Special Rapporteur on Violence against Women were circulated to the Commission.

7. At the ___ meeting, on 8 March, the Chair of the Permanent Forum on Indigenous Issues made a statement.

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B. Attendance

8. The session was attended by representatives of States members of the Commission. Observers for other States Members of the United Nations and for non-member States, representatives of organizations of the United Nations system and observers for intergovernmental, non-governmental and other organizations also attended.

C. Officers of the Commission

9. In accordance with paragraph 2 of Economic and Social Council resolution 1987/21, the officers are elected to the Bureau of the Commission for a term of office of two years. The following officers were elected at the 1st and 2nd meetings of the fifty-sixth session, on 14 March 2011 and 27 February 2012, to serve on the Bureau of the fifty-sixth and fifty-seventh sessions:

Chair:
Marjon Kamara (Liberia)

Vice-Chairs:
Irina Velichko (Belarus)
Carlos Enrique García González (El Salvador)
Filippo Cinti (Italy)
Ana Marie Hernando (Philippines)

Vice-Chair-cum-Rapporteur:
Filippo Cinti (Italy)

10. At the 2nd meeting, on 27 February, the Commission elected, by acclamation, Filippo Cinti (Italy) and Ana Marie Hernando (Philippines) as Vice-Chairs.

D. Agenda and organization of work

11. At its 2nd meeting, on 27 February, the Commission adopted its agenda as contained in document E/CN.6/2012/1. The agenda read as follows:

1. Election of officers.
2. Adoption of the agenda and other organizational matters.
3. Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century":
   (a) Implementation of strategic objectives and action in critical areas of concern and further actions and initiatives:
      (i) Priority theme: the empowerment of rural women and their role in poverty and hunger eradication, development and current challenges;
      (ii) Review theme: financing for gender equality and the empowerment of women;

(b) Emerging issues, trends and new approaches to issues affecting the situation of women or equality between women and men: engaging young women and men, and girls and boys, to advance gender equality;

(c) Gender mainstreaming, situations and programmatic matters.

4. Communications concerning the status of women.

5. Follow-up to Economic and Social Council resolutions and decisions.

6. Provisional agenda for the fifty-seventh session of the Commission.

7. Adoption of the report of the Commission on its fifty-sixth session.

12. Also at the same meeting, the Commission approved its organization of work, as contained in document E/CN.6/2012/1/Add.1.

E. Appointment of the members of a working group on communications on the status of women

13. Pursuant to Economic and Social Council resolution 1983/27, the Commission established a working group to consider communications concerning the status of women. In accordance with Economic and Social Council resolution 2009/16, the following five members, nominated by their regional groups, were appointed to the working group of the fifty-sixth and fifty-seventh sessions:

Ms. Li Xiaomei (China)

Ms. Fatima Alfeine (Comoros)

Mr. Ruben Armando Escalante Hasbún (El Salvador)

Ms. Noa Furman (Israel)

Mr. Grigory Lukyantsev (Russian Federation)

F. Documentation

14. The list of documents before the Commission at its fifty-sixth session is available from www.un.org/womenwatch/daw/csw/csw56/documentation.htm.

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Commission on the Status of Women
Fifty-sixth session
27 February-9 March 2012
Agenda item 6
Provisional agenda for the fifty-seventh session of the Commission

Provisional agenda and documentation for the fifty-seventh session of the Commission on the Status of Women

1. Election of officers.

2. Adoption of the agenda and other organizational matters.

Documentation

Annotated provisional agenda and proposed organization of work of the Commission on the Status of Women

3. Follow-up to the Fourth World Conference on Women and to the special session of the General Assembly entitled "Women 2000: gender equality, development and peace for the twenty-first century":

   (a) Implementation of strategic objectives and action in critical areas of concern and further actions and initiatives:

      (i) Priority theme: elimination and prevention of all forms of violence against women and girls;

      (ii) Review theme: the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS;

Documentation

Report of the Secretary-General on the elimination and prevention of all forms of violence against women and girls

Report of the Executive Director of the United Nations Entity for Gender Equality and the Empowerment of Women

Note by the Secretariat containing a discussion guide for the high-level round table on the elimination and prevention of all forms of violence against women and girls

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Report of the Secretary-General on proposals for priority themes for future sessions of the Commission on the Status of Women (Economic and Social Council resolution 2009/15, para. 3)

(b) Emerging issues, trends and new approaches to issues affecting the situation of women or equality between women and men;

(c) Gender mainstreaming, situations and programmatic matters.

Documentation

Report of the Secretary-General on progress in mainstreaming a gender perspective in the development, implementation and evaluation of national policies and programmes, with a particular focus on the priority theme

Report of the Secretary-General on the situation of, and assistance to, Palestinian women

Report of the United Nations Entity for Gender Equality and the Empowerment of Women on the activities of the United Nations Trust Fund in Support of Actions to Eliminate Violence against Women

Note by the Secretariat transmitting the outcome of the fifty-second and fifty-third sessions of the Committee on the Elimination of Discrimination against Women

4. Communications concerning the status of women.

Documentation

Note by the Secretary-General transmitting the list of confidential communications concerning the status of women and responses thereto

5. Follow-up to Economic and Social Council resolutions and decisions.

Documentation

Letter from the President of the Economic and Social Council to the Chair of the Commission on the Status of Women

6. Provisional agenda for the fifty-eighth session of the Commission.

7. Adoption of the report of the Commission on its fifty-seventh session.